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PTO/SB/05 (12/97)

Approved for use through 09/30/00. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only) for new nonprovisional applications under 37 CFR 1.53(b)</small>	Attorney Docket No. X-10909C	
	First Named Inventor or Application Identifier	
	Christopher John Rito	
	Express Mail Label No. EL559725224US	

2386 U.S. PTO
10/694467



102703

Application Elements See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	
2. <input checked="" type="checkbox"/> Specification [Total 132] Pages (preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claims- Abstract of the Disclosure	
3. <input type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets <input type="checkbox"/>	
4. <input type="checkbox"/> Oath or Declaration [Total Pages <input type="checkbox"/>] <ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]<ul style="list-style-type: none">i. <input checked="" type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
5. <input checked="" type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	
6. <input type="checkbox"/> Microfiche Computer Program (Appendix)	
7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies	
ACCOMPANYING APPLICATION PARTS	
8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney	
10. <input type="checkbox"/> English Translation Document (if applicable)	
11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
12. <input checked="" type="checkbox"/> Preliminary Amendment	
13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
14. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired	
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
16. <input type="checkbox"/> Other: <u>XXX</u>	

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:
☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. 10/120,302

18. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label	(Insert Customer No. Or Attach bar code label here)	or	Correspondence address below
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Eli Lilly and Company

ADDRESS Patent Division P.O. Box 6288			
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CITY	Indianapolis	STATE	Indiana	ZIP CODE	46206-6288
COUNTRY	U.S.A.	TELEPHONE	317-276-2966	FAX	317-277-6534

SUBMITTED BY	GILBERT T. VOY	Complete (if applicable)
Typed or Printed Name		Reg. Number 43,972
Signature		Date

Express Mail mailing label number 10/27-03
Date of Deposit 10/27-03
EL 559725224 US

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Queen Thomas Queen Thomas
Printed Name Signature

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PTO/SB/17 (12/97)

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FEE TRANSMITTAL

Note: Effective November 10, 1997.

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$770.00)

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit
Account
Number
Deposit
Account Name

05-0840

Eli Lilly and Company

☒

Charge Any
Additional Fee
Required Under
37 CFR 1.16 and
1.17

☐

Charge the Issue Fee Set
in 37 CFR 1.18 at the
Mailing of the Notice of
Allowance

2. ☐

Payment Enclosed:

☐

Check

☐

Money
Order

☐

Other

FEE CALCULATION

1. FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	770	201	385	Utility filing fee	770
106	340	206	170	Design filing fee	
107	530	207	265	Plant filing fee	
108	770	208	385	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. CLAIMS

Total Claims	12	-	0	X	18	=	0
Independent Claims	2	-	0	0	86	=	0
Multiple Dependent Claims (first time)		3**	0	0	290	=	0

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	86	202	43	Independent claims in excess of 3
104	290	204	145	Multiple dependent claim
109	86	209	43	Reissue independent claims over original patent
110	18	210	9	Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$0)

**or number previously paid, if
greater; For Reissues, see above

SUBMITTED BY

Typed or
Printed Name

Signature

G. J. V. O. J.

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Printed Name

Signature

Complete if Known

Application Number

Filing Date

First Named Inventor

Group Art Unit

Examiner Name

Attorney Docket Number

Christopher John Rito

X-10909C

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge-late filing fee or oath	
127	50	227	25	Surcharge-late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	420	216	210	Extension for reply within second month	
117	950	217	475	Extension for reply within third month	
118	1,480	218	740	Extension for reply within fourth month	
128	2,010	228	1,005	Extension for reply within fifth month	
119	330	219	165	Notice of Appeal	
120	330	220	165	Filing a brief in support of an appeal	
121	290	221	145	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive-unavoidable	
141	1,330	241	665	Petition to revive- unintentional	
142	1,330	242	665	Utility issue fee (or reissue)	
143	480	243	240	Design Issue Fee	
144	640	244	320	Plant Issue Fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt.	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	770	246	385	Filing a submission after final rejection (37 CFR 1.129(a))	
149	770	249	385	For each additional invention to be examined (37 CFR 1.129(b))	
179	770	279	385	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify)

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

Complete (if applicable)

Reg. Number

43,972

Date

10/25/03